

CAMPAIGN TREASURER'S REPORT SUMMARY

2014 OCT 10 AM 8:35

CITY CLERK

(1) DIDIER ORTIZ
Name
(2) 2400 W. BROWARD BLVD LOT 1510
Address (number and street)
FORT LAUDERDALE, FL 33312
City, State, Zip Code

OFFICE USE ONLY

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: CITY OF FT. LAUDERDALE COMMISSIONER, DIST. 3
☐ Political Committee (PC)
☐ Electioneering Communications Org. (ECO)
☐ Party Executive Committee (PTY)
☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 9, 1, 14 To 9, 30, 14 Report Type: _____

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 25.00
Loans \$ _____, _____, 0.00
Total Monetary \$ _____, _____, 25.00
In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00
Transfers to Office Account \$ _____, _____, 0.00
Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 145.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0.00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) VICTOR AGOSTO

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X [Signature]
Signature

(Type name) DIDIER ORTIZ

☒ Candidate ☐ Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name DIDIER ORTIZ (2) I.D. Number _____

(3) Cover Period 9 / 1 / 14 through 9 / 30 / 14 (4) Page 1 of 1

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) | (8) Contributor | | (9) Contribution | (10) In-kind | (11) Amendment | (12) Amount |
|---------------------------|---|--------------------|------------------------------------|---------------------|-----------------|-------------------|----------------|
| (6) Sequence Number | Street Address & City, State, Zip Code | Type | Occupation | Type | Description | | |
| 9, 20, 14 | IACOVELLI, JOHN 609 SIESTA KEY CIR. # 609 DEERFIELD BEACH, FL 33441 | 1 | MANAGER, COMPUTER TECHNOLOGY | CAS | N/A | | 5.00 |
| 9, 20, 14 | GILBERT, CATHY 2301 NE 6 AVE MIAMI, FL 33137 | 1 | GRAPHIC ARTIST | CAS | N/A | | 20.00 |
| 1 / 1 | | | | | | | |
| 1 / 1 | | | | | | | |
| 1 / 1 | | | | | | | |
| 1 / 1 | | | | | | | |
| 1 / 1 | | | | | | | |
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